

**EXHIBIT 2 – VERIFICATION FORM**

### **VERIFICATION FORM**

Please read the enclosed Notice of Class Action Settlement (“Notice”) before completing this Verification Form.

**To receive a portion of the monetary relief provided in this settlement, you MUST complete the verification process. You may complete the verification process by completing and signing this Verification Form and submitting the completed and signed document to [Settlement Services, Inc.], postmarked or received by [DATE] 2015.**

**You also may complete the verification process online or via telephone as described in section 5(a) of the enclosed Notice.**

**1. Your Contact Information**

Please review and, if necessary, correct on the line to the right your contact information:

Name: <<Name>> \_\_\_\_\_

Address: <<Address>> \_\_\_\_\_

City, State, Zip: <<City>>, <<State>> <<Zip Code>> \_\_\_\_\_

Social Security number (last four digits) only: <<SSN>> \_\_\_\_\_

Telephone number: \_\_\_\_\_

**2. Your Dates of Employment and Estimated Years in a Bargaining Unit Position:**

The personnel and payroll records of BAE Norfolk Ship Repair, Inc. (the “Company”) show that during the Settlement Class Period (October 5, 2007 to December 31, 2014), you worked in a bargaining unit position for the Company during the following dates:

**Dates Worked in a Bargaining Unit Position:** <<Start Date>> - <<End Date>>

<<Second Start Date>> - <<Second End Date>>

**Total Years Employed in a Bargaining Unit Position from 10/5/07 to 12/31/14:**

<<Years Employed>>

**3. Your Estimated Individual Settlement Share:**

**Based on this information, your estimated individual settlement share is \$<<SHARE>>.**

Your estimated individual settlement share is calculated based on a number of assumptions, including the number of participating Sub-Class B/Monetary Relief Class members, and the Court’s approval of the Settlement Administrator fees and the Service Payments to Former Named Plaintiffs. Your actual settlement share may end up being higher or lower than estimated.

If you believe that your dates worked in a bargaining unit position during the period October 5, 2007 to December 31, 2014 are incorrect as stated, please: (i) correct that information in the space below (using additional paper if necessary), and (ii) enclose documentary evidence supporting your correction(s).

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**Note:** If you do not submit a correction, you waive your right to challenge the above pre-printed information. By submitting a correction, you are authorizing the settlement administrator to coordinate with the Company to review Company records and make a determination based on those records and the records you submit. This determination may increase or decrease the value of your share of the settlement. All such determinations by the settlement administrator are final and binding with no opportunity for further appeal.

**4. Signature and Confirmation**

I declare under penalty of perjury under the laws of the United States of America that the information set forth above (including any corrections I have made) is true and correct, and I wish to receive my share of the proposed settlement.

Dated: \_\_\_\_\_, 2015 \_\_\_\_\_  
Signature

**5. Postmark Deadline**

**Your Verification Form must be mailed to the Settlement Administrator and POSTMARKED or RECEIVED on or before \_\_\_\_\_, 2015.** A Verification Form postmarked or received by the Settlement Administrator later than this deadline will not be accepted absent good cause shown. A self-addressed, postage pre-paid stamped envelope has been enclosed for your convenience. This verification form must be sent to the Settlement Administrator at.

[BAE Systems Class Action] Settlement Administrator  
Settlement Services, Inc.

\_\_\_\_\_  
\_\_\_\_\_  
Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**6. Questions? Disputes?**

If you have questions regarding this form, please contact the settlement administrator at the number above.